

# BEST AVAILABLE COPY

MULTI-DEPENDENT CLAIMS FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
151							51					
152							52					
153							53					
154							54					
155							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
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32							82					
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35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.							TOTAL IND.					
TOTAL DEP.							TOTAL DEP.					
TOTAL CLAIMS							TOTAL CLAIMS					

# BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO. 09/866115	FILING DATE 5-29-01				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1							51				
102							52				
103							53				
104							54				
105							55				
106							56				
107							57				
108							58				
109							59				
110							60				
111	①						61				
112							62				
113	①						63				
114							64				
115							65				
116							66				
117							67				
118							68				
119							69				
120							70				
121	①						71				
122							72				
123							73				
124							74				
125							75				
126							76				
127							77				
128	1						78				
129	#	①					79				
130		①					80				
131							81				
132							82				
133							83				
134							84				
135							85				
136	b						86				
137							87				
138	①						88				
139							89				
140							90				
141	①						91				
142	1	#					92				
143	#	①					93				
144		①					94				
145							95				
146							96				
147	①						97				
148							98				
149							99				
150	①						100				
TOTAL IND.	2						TOTAL IND.				
TOTAL DEP.	48						TOTAL DEP.	6			
TOTAL CLAIMS	50						TOTAL CLAIMS	6			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

# BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO. 09/660115	FILING DATE 5-29-01						
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
1	/												
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35		/											
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38		/											
39		/											
40		/											
41		/											
42		(D)											
43		/											
44		/											
45		(D)											
46		/											
47		/											
48		(P)											
49		/											
50		(D)											
TOTAL IND.	/												
TOTAL DEP.	49												
TOTAL CLAIMS	50												
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS													